## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

MCGEPOITS

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                         |   |                               |                    |                                 |                  | SMALL ENTITY TYPE |        |                        | OR       | OTHER THAN OR SMALL ENTITY |                        |
|---|-------------------------|---|-------------------------------|--------------------|---------------------------------|------------------|-------------------|--------|------------------------|----------|----------------------------|------------------------|
| TOTAL CLAIMS  |                         |   | 29                            |                    |                                 |                  | RA                |        | FEE                    | ا آ      | RATE                       | FEE                    |
| FOR   |                         |   | NUMBER FILED                  |                    | NUMBER EXTRA                    |                  | BASIC             |        | 370.00                 | OR       | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |                         |   | ₹9 minus 20=                  |                    | * 9                             |                  | X\$               | 9=     |                        | OR       | X\$18=                     | 162                    |
| INDEPENDENT CLAIMS  |                         |   | 3 minus 3 =                   |                    | *                               |                  | X4                | 2=     |                        | OR       | X84=                       | 7                      |
| МU  | LTIPLE DEPEN            | DENT CLAIM PI                             | RESENT                        |                    |                                 |                  | +14               | 10=    |                        | OR       | +280=                      |                        |
| * If  | the difference          | in column 1 is                            | ess than zero, enter "0" in c |                    |                                 | olumn 2          | TOTAL             |        |                        | OR<br>OR |                            | 902                    |
| CLAIMS AS AMENDED - PART II   |                         |   |                               |                    |                                 |                  | .0                | · · ·- |                        | 1 ~''    | OTHER                      | THAN                   |
|   |                         | (Column 1)                                | (Column 2)<br>HIGHEST         |                    | ımn 2)                          | (Column 3) SM    |                   | ALL    |                        | OR       | SMALL                      |                        |
| AMENDMENT A   |                         | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                               | NUM<br>PREVI       | HEST<br>MBER<br>IOUSLY<br>) FOR | PRESENT<br>EXTRA | RA                | TE     | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total                   | *   | Minus                         | **                 |                                 | =                | X\$               | 9=     |                        | OR       | X\$18=                     |                        |
|   | Independent             | *   | Minus                         | ***                | T OL AUA                        | = -              | X4                | 12=    |                        | OR       | X84=                       |                        |
| L   | FIRST PRESE             | NTATION OF M                              | ULTIPLE DE                    | PENDEN             | II CLAIM                        |                  | +14               | 40=.   |                        | OR       | +280=                      |                        |
|   |                         |   |                               |                    |                                 |                  |                   | OTAL   |                        | OR       | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |                         |   |                               |                    |                                 |                  |                   | r. FEE |                        | •        | ,                          |                        |
| AMENDMENT B   |                         | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                               | HIG<br>NUI<br>PREV | HEST<br>MBER<br>YOUSLY<br>D FOR | PRESENT<br>EXTRA | RA                | ATE    | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
| DME   | Total                   | *   | Minus                         | **                 |                                 | =                | X\$               | 9=     |                        | OR       | X\$18=                     |                        |
| ME  | Independent             | *   | Minus                         | ***                |                                 | =                | X4                | 12=    |                        | OR       | X84=                       |                        |
|   | FIRST PRESE             | NTATION OF M                              | ULTIPLE DE                    | ULTIPLE DEPENDENT  |                                 |                  | +14               | 40=    |                        | OR       | +280=                      |                        |
|   |                         |   |                               |                    |                                 |                  | <u> </u>          | TOTAL  |                        | -        | TOTAL<br>ADDIT. FEE        | -                      |
|   |                         | (Column 1)                                |                               | (Coli              | umn 2)                          | (Column 3)       | ADDI              | T. FEE |                        |          | AUDII. FEE                 | <u> </u>               |
| AMENDMENT C   |                         | CLAIMS REMAINING AFTER AMENDMENT          |                               | HIG<br>NU<br>PREV  | MBER<br>/IOUSLY<br>D FOR        | PRESENT<br>EXTRA | RA                | ATE    | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
| ¥   | Total                   | *   | Minus                         | **                 |                                 | =                | X\$               | 9=     |                        | OR       | X\$18=                     |                        |
| ME  | Independent             | *   | Minus                         | ***                |                                 |                  | X4                | 42=    |                        | OR       | X84=                       |                        |
| الم   | FIRST PRESENTATION OF M |   | IULTIPLE DEPENDEN             |                    | NT CLAIM                        | 1                | J                 | 40=    |                        | OR       |                            |                        |
| *   | If the entry in colu    | ımn 1 is less than                        | the entry in co               | lumn 2, wi         | rite "0" in co                  | olumn 3.         | L                 | TOTAL  |                        | 4        | TOTAL                      | -                      |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                         |   |                               |                    |                                 |                  |                   |        |                        |          |                            | <u> </u>               |